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CONFIRMATION NO. 4042

SERIAL NUMBER 10/752,263	FILING DATE 01/05/2004  RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. M-15239-1P US
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## APPLICANTS

William R. Rassman, Marina Del Ray, CA;

Jae P. Pak, Torrance, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/640,598 08/12/2003 *yes*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/12/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Rassman</i> Initials <i>JP</i>				

## ADDRESS

32605  
 MACPHERSON KWOK CHEN & HEID LLP  
 1762 TECHNOLOGY DRIVE, SUITE 226  
 SAN JOSE , CA  
 95110

## TITLE

Method and apparatus for transplanting a hair graft

FILING FEE  RECEIVED 552	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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